

For KCC Use: 3-18-06
Effective Date: 3
District # 3
SGA? Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

CORRECTION

CORRECTED

Form C-1
December 2002

Form must be Typed
All blanks must be Filled

Shiloh

Expected Spud Date 03/15/06
month day year

Spot Ap. 3E-NW-NW NW Sec. 25 Twp. 26S S. R. 17 East West

OPERATOR: License# 33583
Name: Admiral Bay Inc
Address: 14550 E Easter Ave, Ste. 1000
City/State/Zip: Centennial, CO 80112
Contact Person: Steven Tedesco
Phone: 303-327-7016

570 feet from N / S Line of Section
540 feet from E / W Line of Section
Is SECTION Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)

CONTRACTOR: License# 5786
Name: McGown Drilling

County: Allen
Lease Name: Markham Well #: 4-25-BV
Field Name: Wildcat

Is this a Prorated / Spaced Field? Yes No
Target Formation(s): Bartlesville

Well Drilled For: Well Class: Type Equipment:
 Oil Enh Rec Infield Mud Rotary
 Gas Storage Pool Ext. Air Rotary
 OWWO Disposal Wildcat Cable
 Seismic; # of Holes Other
 Other

Nearest Lease or unit boundary: 540 FEL
Ground Surface Elevation: 969 feet MSL
Water well within one-quarter mile: Yes No
Public water supply well within one mile: Yes No
Depth to bottom of fresh water: 100'+
Depth to bottom of usable water: 200'+

If OWWO: old well information as follows:

Operator: _____
Well Name: _____
Original Completion Date: _____ Original Total Depth: _____

Surface Pipe by Alternate: 1 2
Length of Surface Pipe Planned to be set: 20'
Length of Conductor Pipe required: None
Projected Total Depth: Bartlesville
Formation at Total Depth: 900

Directional, Deviated or Horizontal wellbore? Yes No

Water Source for Drilling Operations:
 Well Farm Pond Other _____

If Yes, true vertical depth: _____

Bottom Hole Location: _____

DWR Permit #: _____

KCC DKT #: _____

(Note: Apply for Permit with DWR)

* Was: #4-25-NW
Is: #4-25-BV

Will Cores be taken? Yes No

If Yes, proposed zone: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 3/29/06 Signature of Operator or Agent: [Signature] Title: Land Manager

For KCC Use ONLY
API # 15 - 001-29368-0000
Conductor pipe required NONE feet
Minimum surface pipe required 20 feet per Alt. ✓②
Approved by: DPW 3-13-06 / RCH 4-19-06
This authorization expires: 9-13-06
(This authorization void if drilling not started within 6 months of effective date.)
Spud date: _____ Agent: _____

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired

Signature of Operator or Agent: _____

Date: _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

25
26
7E

CORRECTED

Side Two

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - 001-29368-0000
Operator: Admiral Bay Inc
Lease: Markham
Well Number: 4-25-BV
Field: Wildcat
Number of Acres attributable to well: 40
QTR / QTR / QTR of acreage: - NW - NW

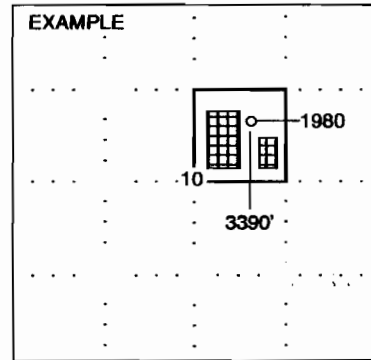
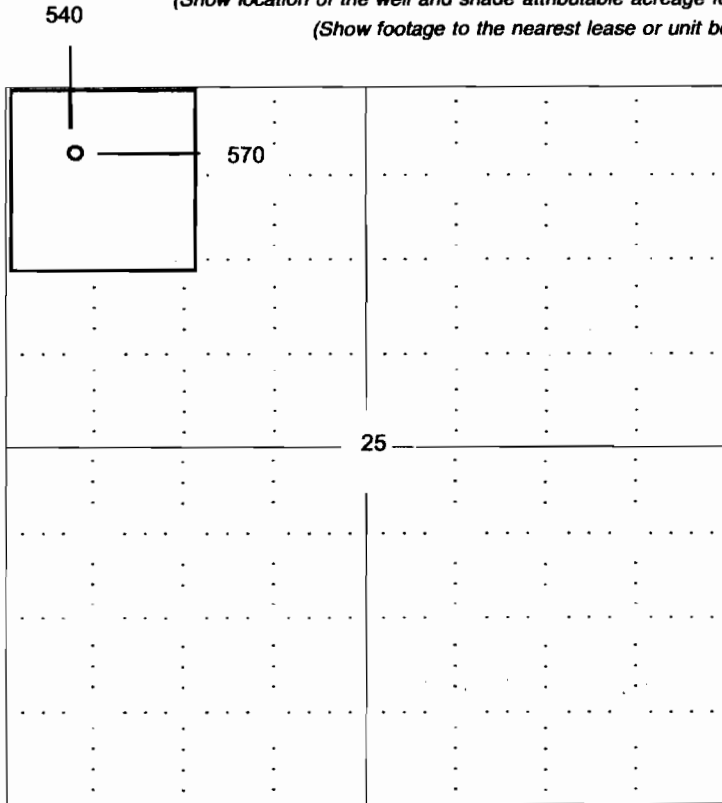
Location of Well: County: Allen
570 feet from N / S Line of Section
540 feet from E / W Line of Section
Sec. 25 Twp. 26S S. R. 17 East West

Is Section: Regular or Irregular

If Section is Irregular, locate well from nearest corner boundary.
Section corner used: NE NW SE SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)
(Show footage to the nearest lease or unit boundary line.)



SEWARD CO.

NOTE: In all cases locate the spot of the proposed drilling locaton.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the section's south / north and east / west.
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT**

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

CORRECTED

Operator Name: Admiral Bay Inc		License Number: 32977	
Operator Address: 14550 E Easter Ave., Ste. 100			
Contact Person: Janet Johnson		Phone Number: (303) 327 - 7016	
Lease Name & Well No.: Markham 4-25-BV		Pit Location (QQQQ): _____ - _____ - NW - NW Sec. 25 Twp. 26S R. 18 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 570 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 540 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Allen County	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit (If WP Supply API No. or Year Drilled)		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Pit dimensions (all but working pits): 20 Length (feet) 20 Width (feet) _____ N/A: Steel Pits		Depth from ground level to deepest point: 5 (feet)	
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit N/A feet Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: _____ measured _____ well owner _____ electric log _____ KDWR	
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: Native mud Number of working pits to be utilized: 2 Abandonment procedure: air dry and back fill Drill pits must be closed within 365 days of spud date.	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.			
Date: 3/29/06		Signature of Applicant or Agent: <i>Janet Johnson</i>	
KCC OFFICE USE ONLY			
Date Received: 3/31/06 Permit Number: _____ Permit Date: 3/31/06 Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

15-001-09368-0000

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202